

STATE OF DELAWARE DEPARTMENT OF TRANSPORTATION DIVISION OF MOTOR VEHICLES

<u>VEHICLE TRANSFER NOTIFICATION</u> WITH BUYER INFORMATION

(Please complete all information)

I,		, sold my vehicle,
(Name of Seller)		
Make:		
Model:		
Year:		
VIN (Serial Nur	mber):	
Tag Number:		
To:		
	(Name of Buyer)	
Address:		
	(Street Address)	
_	(City/State/Zip)	
Sale Date:		
	(Month/Day/Year)	
Selling Price:		
(Signature of Seller)		(Date)